Deptt. of Offical Language Govt, of India from time to time.

(b) No, Sir.

(c) and (d) Action has already been initiated to constitute a Common Cadre of Official Language posts in the Subordinate Offices of Directorate General of Health Services including CRI, Kasauli, for creating promotional avenues for Hindi staff.

National Health Policy

2676. SHRI JOYANTA ROY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is any National Health Policy in operation as on date;

(b) if so, the details thereof and when the policy was inaugurated;

(c) the duration of the policy and its date of termination; and

(d) by when Government's policy of "health for all" is likely to be translated into reality?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHIL-MALAI): (a) and (b) The National Health Policy was adopted by Government of India in 1983. The objectives envisaged under National Health Policy inter alia include commitment to the goal of "Health for All" by 2000 A.D. through the primary health care approach, encouragement to community participation, adoption of the small family norm, restructuring of medical education to meet the manpower requirements. The need to develop a referral system, to establish epidemiological stations with duly trained staff, involve traditional practitioners in health care delivery and the development of bio-medical research have also been emphasized.

(c) The policy is still effective although the goals and achievements arc reviewed periodically as also the demographic and epidemiological change which have occurred with the passage of time necessitating changes in strategy.

(d) The progress made in achieving the goal set out under the Health Policy indicates that the targets for infant mortality rate, life expectancy at birth, immunization goals for pregnant women and infants and elimination of leprosy are likely to be achieved. In the case of disease like tuberculosis and blindness control more time would be needed to achieve the goals fully. A number of national programmes for the control of AIDS, Leprosy, TB, cataract, blindness and malaria are being implemented with a view to reduce the burden of disease and support the States in their endeavours to maintain public health.

Expenditure on Health

2677. SHRI E. BALANANDAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the expenditure on health by Central Government and State Governments separately from First Five Year Plan to Eighth Five Year Plan, Plan-wise?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHIL-MALAI): A statement showing pattern of Plan Investment on Health, Family Welfare during different plan periods in public sector (Centre, States and UTs) as received from Planning Commission is given. *(See below)*

Statement

(Rs. in Crore)

S.N ~	Period	Total Plan Investment (All Div. Heads)	II. (Centre ihillay'lixpt	-ullli &. Slates) (. % of 3	Family Well'; Qutlay Expd %	re of 3
1	2	3	4	5	6	7
1.	First Plan (Actuals) (1951-56)	1960.00	65.20	3.33	0.10	0.01
2.	Second Plan (Actuals) (1956-61)	4672.00	I4W.HII	3.01	5.00	0.11
3.	Third Plan (Actuals) (1961-66)	8576.50	225.Mil	2.63	34.90	0.29
4.	Annual Plans (Actuals) (1966-69)	6625.40	140.20	2.12	70.40	1.06
5.	Fourth Plan (Actuals) (1969-74)	15778.80	335.511	2.13	278.00	1.76
6.	Fifth Plan (Actuals) (1974-79)	39626.20	7WI. Nil	1.93	491.80	1.25
7.	(1979-80) (Actuals)	12176.50	22 \ III	I.K3	118.50	0.97
8.	Sixth Plan (Outlay) (1980-85)'	97500.00	IH.'I.INI	I.K7	1010.00	1.04
	Sixth Plan (Outlay)	109291.70	2025.20	1.85	1387.00	1.27
9	Seventh Plan (Actuals) (1985-90)	180000.00	3392.«XI	1.88	3256.30	1.81
	Seventh Plan (Actuals)	218729.60	3f.KK.60	1.69	3120.80	1.43
10.	1990-91 (Actuals)	61518.10	960. W	1.56	784.90	1.28
11.	1991-92 (Actuals)	65855.80	1012.20	1.58	856.60	1.30
12.	Eighth Plan (Actuals) (1992-97)	434100.00	7532.20	1.75	6500.00	1.50

Source: F.R. Division Planning Commission.

Death caused due to Hepatitis 'B' Virus

2678. DR. B.B. DUTTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether as per World Health Organisation Hepatitis 'B' virus infection has caused more deaths than AIDS infection;

(b) if so, the details of the deaths which resulted in India during 1996-97 and 1997-98 from Hepatitis 'B' virus infection, State-wise; and

(c) the steps taken/proposed to be taken to alert the people about this dangerous infection?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHIL MALAI): (a) Yes, Sir.

(b) No authentic data is available of the number of deaths caused by Hepatitis-B infection alone. However, according to available data, the number of cases of Viral Hepatitis (all types) during 1996 and 1997 (provisional) is as follows.

Year	No. of persons persons died	No. of infected
1996	1,17,954	801
1997	89,038	962